Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL					
OMB Number:	3235-0076				
Expires:	April 30, 2008				
Estimated aver	age burden				
nours per form	16.00				

SEC US	E ONLY
Prefix	Serial
DATE RI	ECEIVED
<u> </u> '	1

Name of Offering	( check if this is	an ar	nendment and nai	me has changed,	and inc	licate c	:hange.)			
Red Leaf Res	ources, Inc.									
Filing Under (Che	ck box(es) that appl	y):	☐ Rule 504	☐ Rule 505	X	Rule	506 I	Section	4(6)	□ ULOE
Type of Filing:	☐ New Filing	図	Amendment							
			A. BASIC	IDENTIFICA'	TION	DATA			4	
1. Enter the inform	nation requested abo	out th	e issuer							
Name of Issuer (	check if this is an	amen	dment and name l	has changed, and	indica	te chan	ige.)			
Red Leaf Res	ources, Inc.									
Address of Execu	tive Offices	(	Number and Stree	et, City, State, Zi	p Code	;)	Teleph	one Numb	рег	07077971
	pal Business Operat Executive Offices)	ions (	Number and Stre	et, City, State, Z	ip Cod	e)	Teleph	one Numb	er (In	THOCESSED
Brief Description of	of Business						,		3	SEP 2 0 2007
Type of Business Corporation	Organization		imited partnershi	p, already forme	d			other	nlesse	THOMSON FINANCIAL
business trus	t		imited partnershi	p, to be formed				outer .	(рисазс	, specify j.
	d Date of Incorpora orporation or Organi		n: (Enter two-let	Month Ler U.S. Postal Sa; FN for other for		] Abbrev		Dr State:	Actu	nal   Estimated
CENEDAL INOT	DUCMIONO				)					

# GENERAL INSTRUCTIONS

## Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date is was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

A. BASIC IDENTIFICATION DATA	
2. Enter the information requested for the following:	
<ul> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> </ul>	
<ul> <li>Each beneficial owner having the power to vote or dispose, or direct the vote or dispositio securities of the issuer;</li> </ul>	n of, 10% or more of a class of equity
Each executive officer and director of corporate issuers and of corporate general and managing	ng partners of partnership issuers; and
<ul> <li>Each general and managing partner of partnership issuers.</li> </ul>	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ D	irector   General and/or  Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ D	irector
Full Name (Last name first, if individual)	<del></del>
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer  I	Director   General and/or  Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply:    Promoter    Beneficial Owner    Executive Officer    E	Director General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ I	Director
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ ☐	Director
Full Name (Last name first, if individual)	-
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Di	rector General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	

				В. І	NFORM <i>A</i>	TION AB	OUT OFF	ERING			· · · · · ·		
												Yes	No
1. Ha	as the issue	sold, or do	es the issuer						_				
2 17/	1						nn 2, if filin	-				•	
2. What is the minimum investment that will be accepted from any individual?							\$						
3. Do	oes the offe	ring permit	joint owners	hip of a sir	ngle unit?			*****************				Yes □	No
			quested for										
commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or													
sta	ites, list the	name of the	ne broker or	dealer. If	more than	five (5) p	ersons to be						
			set forth the		on for that	broker or d	lealer only.			<del></del>			
run N	ame (Last )	iame iirsi, i	f individual)										
<del></del>					<u>G: 0</u>	<i>a</i> : 0 1	<del>,</del>	<del>-</del>	*****				
Busine	ess or Resid	lence Addre	ss (Number	and Street,	City, State	, Zip Code	)						
Name	of Associat	ed Broker o	r Dealer	<del></del> -			<del></del> -			<del></del>			
rvanic	OI PASSOCIA	ed Broker d	i Dealei										
States	in Which F	erson Listed	i Has Solici	ted or Inten	ds to Solic	it Purchase	ers		<u> </u>		<del></del>		
(Ch	eck "All St	ates" or chec	ck individua	l States)	•••••			•••••			í	⊐ All S	tates
[AL]			[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[ H1 ]	[ ID	•
[ IL ] [MT]			[KS] [NH]	[KY] {NJ}	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[ MI ] {OH}	[MN] {OK}	[MS] [OR]	[MC {PA	•
RI		[SD]	[TN]	{TX]	[01]	[VT]	[VA]	[WA]	[WV]		[WY]	[PR	_
Full N	ame (Last i	name first, if	individual)							-	- <del>-</del>		
							<del> </del>			<del></del>			
Busine	ess or Resid	ence Addre	ss (Number	and Street,	City, State	, Zip Code	)						
Name	of Associat	ed Broker o	r Dealer				<del>-</del>						
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States	in Which P	erson Listed	l Has Solicit	ed or Inten	ds to Solic	it Purchase	rs	·····		<del></del> .			
(Che	eck "All Sta	ites" or chec	k individua	States)			***************************************				c	J All S	tates
[AL]		[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[ FL ]	[GA]	[ HI ]	[ ID	
[ IL ] [MT]		[ IA ] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[ MI ] [OH]	[MN] [OK]	[MS] [OR]	[MC [PA	
[RI]		[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR	
Full N	ame (Last r	ame first, if	individual)										
									***	<u> </u>			
Busine	ess or Resid	ence Addres	ss (Number	and Street,	City, State	, Zip Code	)						
Name	of Associat	ed Broker o	r Dealer					<del></del>		· <del></del>		<u>-</u>	
Tvanic	or rissocial	ca Biokei o	i i)caici										
States	in Which P	erson Listed	l Has Solicit	ed or Inten	ds to Solic	it Purchase	rs						
(Ch	eck "All Sta	ites" or chec	k individua	States)							[	∃ All S	tates
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	{ HI }	[ ID	]
[IL]		[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO	-
[MT]		[NV]	[NH]	[NJ] (TX)	[NM]	[NY]	[NC]	[ND]	[OH]	(OK)	[OR]	[PA	

(Use Blank sheet, or copy and use additional copies of this sheet as necessary.)

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box $\square$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	<b>A</b>	
	Type of Security	Aggregate Offering Pric	Amount Already e Sold
	Debt	\$ <u>-</u> 0	\$-0-
	Equity	\$25,000,000	\$13,174,258.17
	☑ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$ <u>-0-</u>	<u>\$-0-</u>
	Partnership Interests	\$ <u>-0</u> -	<u>\$-0-</u>
	Other (Specify )	\$ <u>-0-</u>	\$ <u>-0-</u>
	Total	\$25,000,000	\$ <u>13,174,258.17</u>
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	8	\$13,174,258.17
	Non-accredited Investors	0-	\$-0-
	Total (for filings under Rule 504 only)	N/A	_ SN/A
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question I.		
	Tour of Official	Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505	N/A_	\$ <u>N/A</u>
	Regulation A	N/A	_ \$ <u>N/A</u>
	Rule 504	N/A	\$ <u>N/A</u>
	Total	N/A	\$ <u>N/A</u>
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees	⊠	\$ <u>-0-</u>
	Printing and Engraving Costs	X	\$-0
	Legal Fces	X	\$75,000
	Accounting Fees	X	\$9,000
	Engineering Fees	X	\$_0-
	Sales Commissions (specify finders' fees separately)		\$ <u>-0-</u>
	Other Expenses (identify) Blue sky fees		\$410
	Total		\$84,410

used for each of the purposes shown estimate and check the box to the le	usted gross proceeds to the issuer used or propose. If the amount for any purpose is not known, furth of the estimate. The total of the payments list the issuer set forth in response to Part C - Ques	rnish an ed must		
above.				
			Payments to Officers, Directors, & Affiliates	Payments To Others
Salaries and fees		🖄	\$ <u>-0-</u>	<b>⊠</b> \$ <u>-0-</u>
Purchase of real estate		X	\$ <u>-0-</u>	<b>⊠</b> \$ <u>-0-</u>
Purchase, rental or leasing and insta	allation of machinery and equipment	🗵	\$_0	<b>⊠</b> \$ <u>-0</u>
Construction or leasing of plant but	ildings and facilities	X	\$ <u>-0-</u>	⊠ \$ <u>-0-</u>
offering that may be used in exchar	cluding the value of securities involved in this age for the assets or securities of another	🖾	\$-0	☑ \$-0-
,			\$-0	<b>⊠</b> \$-0
• •			\$-0	<b>⊠</b> \$24,915,590
٠.			\$_0_	⊠ \$-0
			\$ <u>-0-</u>	⊠ \$-0-
			\$ <u>-0-</u>	<b>⊠</b> \$24,915,590
Total Payments Listed (column tota	ils added)	**** *********	🗵 \$ <u>24,915</u>	5 <u>,590</u>
	D. FEDERAL SIGNATURE			
Cha innum has duly accord this votice to	be signed by the undersigned duly authorized po	Decomp If the	nia mation in film	d under Dule 505 the
ollowing signature constitutes an underta	the signed by the undersigned duty authorized policies by the issuer to furnish to the U.S. Securities the issuer or any non-accredited investor pursuant to	and Excha	nge Commission	n, upon written request
1ssuer (Print or Type)	Signature		Da	te//
Red Leaf Resources, Inc.	The last	<u> </u>	9	1/3/67
Name of Signer (Print or Type)	Title of Signer (Print or Type)	1 D	/	, • •
James W. Patten	Chief Executive Officer a	nd Pres	<u>ident</u>	·

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	E. STATE SIGNATURE		
l	. Is any party described in 17 CFR 230,262 presently subject to any of the disqualification provisions of such rule?	Yes	No 🕱
	See Appendix, Column 5, for state response.		

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type) Red Leaf Resources, Inc.	Signature DA	Date 9/13/01
Name (Print or Type)	Title (Print or Type)	
James W. Patten	Chief Executive Officer and Preside	ent

## Instruction

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

## APPENDIX 3 Disqualification under State ULOE Type of security and aggregate Intend to sell (if yes, attach to non-accredited offering price Type of investor and explanation of offered in state amount purchased in State investors in State waiver granted) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) (Part B - Item 1) Number of Number of Accredited Non-Accredited State Yes No Investors Amount Investors Amount Yes No ALΑK AZARCA CO CTDE DC \$25,000,000 \$99,998.27 FL X Common Stock -0--0- $\mathbf{X}$ GΑ HJ ID \$25,000,000 Common Stock \$99,998.27 -0-IL X -0- $\mathbf{X}$ IN ΙA KS KYLA ME MDMA Μl MN MS MO

### APPENDIX 3 Disqualification Type of security under State ULOE Intend to sell and aggregate (if yes, attach offering price Type of investor and to non-accredited explanation of investors in State offered in state amount purchased in State waiver granted) (Part C-Item 2) (Part B - Item 1) (Part C-Item 1) (Part E-Item 1) Number of Number of Non-Accredited Accredited Investors State Yes No Investors Amount Amount Yes No MT NE NVNH \$25,000,000 NJ X 3 \$1,499,993.48 -0--()-X Common Stock NM \$25,000,000 \$1,999,655.72 NY $\mathbf{X}$ -0-X ł -0-Common Stock NC ND ОН OK OR PΑ RI SCSD TN TX \$25,000,000 UT $\mathbf{X}$ \$475,000 $\mathbf{X}$ 1 -0--()-Common Stock VT\$25,000,000 \$8,999,612,43 VA $\mathbf{X}$ -0--0-X Common Stock WA wv

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